HUMAN SERVICES DEPARTMENT[441]

Adopted and Filed

Pursuant to the authority of Iowa Code section 234.6, the Department of Human Services amends Chapter 177, "In-Home Health Related Care," Iowa Administrative Code.

These amendments change the requirements for Department service workers' involvement with clients who are receiving state supplementation to meet the costs of nursing and personal care provided in the client's home. The amendments:

- Extend the requirements for social worker review of the entire care plan from every three months to every six months.
- Eliminate the requirement for Department social workers to provide for guardianship, commitment, or protective placement when in-home health related care services are terminated for a client who is unable to protect the client's own interests.
 - Clarify the requirements for case plan approval.

Review of a case at six-month intervals is consistent with the requirements for other service programs. The 60-day reviews required of the physician and the supervising nurse serve to monitor the client's service needs. Service workers assist clients in finding whatever alternative protective services are available, which are not necessarily the specific services listed in the current rule. Having a list of alternatives in the rules is not necessary.

These amendments do not provide for waivers in specified situations. Requests for the waiver of any rule may be submitted under the Department's general rule on exceptions at 441—1.8(17A,217).

Notice of Intended Action on these amendments was published in the Iowa Administrative Bulletin on November 19, 2008, as **ARC 7371B**. The Department received no comments on the Notice of Intended Action. These amendments are identical to those published under Notice of Intended Action.

The Council on Human Services adopted these amendments on January 14, 2009.

These amendments are intended to implement Iowa Code section 249.3(2)"a"(2).

These amendments shall become effective on April 1, 2009.

The following amendments are adopted.

- ITEM 1. Amend subrule 177.4(5) as follows:
- 177.4(5) Certification procedure. The approval by the area office of the department of human services of the case plan by the service area manager or designee shall constitute certification and approval for payment.
 - ITEM 2. Amend subrule 177.6(3) as follows:
 - 177.6(3) Review. The continuing need for in-home health care services shall be reviewed:
- a. At a minimum of every 60 days by the physician, including a written recertification of continuing appropriateness of the plan;
- b. At a minimum of every three <u>six</u> months by the service worker, including a review of the total care plan; and
 - c. At a minimum of every 60 days by the nurse who shall review the nursing plan-; or
- <u>d.</u> More frequent reviews may be frequently if required by the physician, the service worker, or the nurse.

ITEM 3. Amend subrule 177.11(1) as follows:

177.11(1) Request. Upon the request of the client or legal representative. When termination of the program would result in an individual being unable to protect the individual's own interests, arrangements for guardianship, commitment, or protective placements shall be provided.

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EDITOR'S NOTE: For replacement pages for IAC, see IAC Supplement 2/11/09.